



PHYSICIANS
Integrated Medical Group

Physician's Integrated Medical Group

Dear Physician's Integrated Medical Group Member:

Welcome to the Physician's Integrated Medical Group (PIMG); our physicians and the PIMG are delighted to care for your medical needs. This welcome letter will provide you and your family with vital information about your medical insurance and the appropriate ways to easily access medical care. Please take a few moments to familiarize yourself with these important facts.

HMO Insurance/Managed Care Plan: What is it?

The San Francisco Health Plan is a Health Maintenance Organization also known as an HMO. The San Francisco Health Plan, a MediCal local initiative, contracts with the Physician's Integrated Medical Group and its network of medical providers to furnish and coordinate all your medical needs through your Primary Care Physician (PCP). The Primary Care Physician whom you have chosen determined your Medical Group affiliation.

The Physician's Integrated Medical Group is a managed care provider group consisting of Primary Care Physicians and Specialists who mainly practice in the San Francisco County. Your PCP is the Family Practice, Internist, Pediatrician or General practice physician you chose to be your primary doctor. Please remember that your Primary Care Physician must coordinate your medical needs, including hospitalizations, laboratory, X-rays, etc.

Who Will Take Care Of Me If I Get Sick? How Do I Access Medical Care?

Your Primary Care Physician will provide for your medical needs and will coordinate most of your on going care. Your Health Plan member card identifies your PCP and his/her phone number. Your medical care will be provided within the Physician's Integrated Medical Group and you will be referred out of network only if a PIMG physician or affiliated hospital cannot render the appropriate care. As a Physician's Integrated Medical Group (PIMG) member, you can access the network of physicians and medical services at St. Luke's Hospital. St. Luke's Hospital is where your PCP takes care of his/her hospitalized patients.

Your PCP or the on-call physician is available 24 hours a day, 7 days a week for urgent or emergent medical problems. For medical attention needed after hours or on weekends, please call your PCP. Your call will be returned by either your PCP or by the physician on-call. Keep in mind that if you get your PCP's answering service when you call for an after-hours or weekend urgent/emergent medical condition; you can always have the on call physician paged to attend your call. Your PCP or the on-call physician will assess your medical status by telephone and will advise you of the method of treatment most appropriate to your situation.

If you have chosen a PCP you have never met, we encourage you to schedule an introductory visit at your earliest convenience so that you can establish a medical history with your new physician. This will be beneficial for both of you if an unexpected illness occurs and you need immediate treatment. We advise that you and your family call your PCP's office for a first appointment within 30 days of becoming a PIMG member. The PIMG encourages all members to have an "initial health assessment" no later than 120 days from enrolling in our group. We encourage our members to talk to their doctor about the different free health educational programs available to you and your dependents (Diabetes Management, Asthma, etc). If you are or become pregnant you are eligible to participate in the "Comprehensive Perinatal Services Program" (CPSP). Non-English speaking and limited English proficient members have the right to free face-to-face or phone confidential professional interpreter services for medical visits, and should not be required to ask a friend, neighbor, spouse, relative or child to interpret for them. Additionally, any member or PIMG practitioner can refer him or herself to be considered for case management particularly those member's with multiple or complex conditions. Please call your doctor's office or us at (415) 643-9188 for further information in any of the above topics and/or programs. Please call SFHP to receive documents translated into San Francisco threshold languages or on how to file a grievance if your linguistic needs are not meet.

What Is a Medical Emergency?

An Emergency Medical condition is a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that a prudent layperson, with an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in:

1. Serious jeopardy to the health of the individual or, in case of a pregnant woman, the health of the woman and the unborn child; or
2. Serious impairment to bodily functions; or
3. Serious dysfunction of any bodily organ or part.

What Do I Do in an Emergency?

In the event of an unforeseeable Emergency Medical Condition, go to the closest emergency room, or call 911 for assistance and/or an ambulance. It is appropriate for you to use “911” emergency response system in your area for assistance when you have an Emergency Medical Condition that requires an emergency response. You do not require prior authorization for emergency services. Please contact your Primary Care Physician as soon as reasonably possible. If needed, your PCP will coordinate all your medical follow up care.

What should you do if you experience an urgent condition during or after business hours? Contact your doctor at the telephone number listed on your Health Plan ID card. A medical professional is available to direct you to the necessary care. Your doctor will tell you what to do and where to go. He/She will direct you to the most appropriate place to receive care.

On Seeing A Specialist or other Practitioner that Participate with the PIMG...

Under your managed care plan, specialty referrals, practitioners and allied health services referrals require prior authorization from your PCP before services are rendered. Female patients may self-refer to any Physician’s Integrated Medical Group OB/GYN physician for medical services. An annual Well Woman Exam is a covered benefit for all St. Luke’s IMG female members. As a well-trained physician your PCP can manage many conditions, but when your condition warrants the care of a specialist your PCP will refer you to one. Also keep in mind that if you access medical care without the prior authorization from your PCP or St. Luke’s IMG, you may be financially responsible of the charges incurred. Remember, you can access any in-network “sensitive service” without a referral, these services relate to family planning, sexually transmitted diseases, abortion, and confidential HIV testing. For more information on which services require prior authorization please contact your Primary Care Physician or the PIMG at (415) 643-9188.

All PIMG's medical care decisions are only based on appropriateness of care and service. The PIMG does not compensate practitioners, or any other individual conducting utilization review for denials of coverage or service, nor for any modification or reduction in services, nor it encourages barriers to care and service (underutilization). Any member or public person has the right to request a copy of the criteria used to arrive at any medical decision, particularly if a denial letter is issued to you by the PIMG. Also as a member you have the right to request a copy of PIMG’s policies and procedures affecting any aspect of your medical care by calling (415) 643-9188. As a PIMG member you can launch a complaint, a grievance or an appeal regarding any aspect of your care by contacting your Health Plan, the Department of Managed Health Care or us by letter or phone. A physician or a representative of your choosing can act on your behalf for any of these affairs. Please call the PIMG’s Quality Assurance (QA) Specialist at (415) 643-9188 for specific complaint or grievance information, to request a form, to obtain a copy of the Quality Management Program, Quality Management Plan or the PIMG’s progress in meeting its goals.

The PIMG will not discriminate in treating members and makes this publicly known with its to nondiscriminatory behavior. The PIMG’s provision of health services is not influenced by member race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information, or source of payment. The PIMG will accept for treatment any patient in any of the health care services that they provide under the terms on its contracts.

Questions? How To Contact Us...

If you have any questions about referrals, authorizations, benefits, or the right to access linguistic (interpretation) services for non-English speaking members, or for billing issues, you can speak with a Physician's Integrated Medical Group representative at (415) 643-9188. You may be eligible for other local, community or state programs, for more information please call us at the above number or the San Francisco Health Plan at (415) 547-7800. You may also obtain a list of PIMG's participating providers (PCPs and Specialists) or a copy of your Rights and Responsibilities as a member by calling (415) 643-9188. For a variety of additional information please visit us in the web at **www.pimg-inc.com**